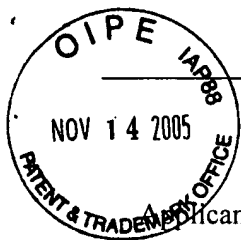


RCE/DPW

Please Direct All Correspondence to Customer Number **20995****REQUEST FOR CONTINUED EXAMINATION**

Applicant : Haruna et al.  
App. No : 10/601,093  
Filed : June 20, 2003  
For : STEERING SKI DEVICE FOR  
SNOWMOBILE  
Examiner : Bryan R. Fischmann  
Art Unit : 3618

**CERTIFICATE OF MAILING**

I hereby certify that this correspondence and all marked attachments are being deposited with the United States Postal Service as first class in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on

November 10, 2005

(Date)

William H. Shreve, Reg. No. 35,678

**Mail Stop RCE**

Commissioner for Patents

P.O. Box 1450

Alexandria, VA 22313-1450

Dear Sir:

This Request for Continued Examination (RCE) is being made as follows:

1. Submission Required under 37 CFR 1.114:

- (X) Enclosed:  
(X) Amendment/Reply in 10 pages.  
(X) Return Postcard.

11/15/2005 NNGUYEN1 00000067 10601093

01 FC:1801 790.00 OP  
02 FC:1253 1020.00 OP

Please Direct All Correspondence to Customer Number **20995**

2. Fees:

| FEE CALCULATION      |             |                |                      |               |
|----------------------|-------------|----------------|----------------------|---------------|
| FEE TYPE             |             | FEE CODE       | CALCULATION          | TOTAL         |
| RCE Fee              |             | 1801 (\$790)   |                      | \$790         |
| Suspension of Action |             | 1463 (\$130)   |                      | \$0           |
| Total Claims         | 26 - 25 = 1 | 1202 (\$50)    | 1 x 50 =             | \$50          |
| Independent Claims   | 4 - 4 = 0   | 1201 (\$200)   | 0 x 200 =            | \$0           |
| Multiple Claim       |             | 1203 (\$360)   |                      | \$0           |
| 1 Month Extension    |             | 1251 (\$120)   |                      | \$0           |
| 2 Month Extension    |             | 1252 (\$450)   |                      | \$0           |
| 3 Month Extension    |             | 1253 (\$1,020) |                      | \$1,020       |
|                      |             |                | <b>TOTAL FEE DUE</b> | <b>\$1860</b> |
|                      |             |                |                      |               |

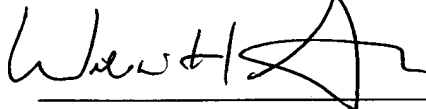
(X) An extension of time is hereby requested by payment of the appropriate fee indicated above.

3. Payment:

(X) Check in the amount of \$1860 to cover the above fees.

Please charge any additional fees, including any fees for additional extension of time, or credit overpayment to Deposit Account No. 11-1410.

Respectfully submitted,  
KNOBBE MARTENS OLSON & BEAR LLP



Dated: November 10, 2005

William H. Shreve  
Registration No. 35,678  
Attorney of Record  
Customer No. 20,995  
(949) 760-0404